



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

November 19, 2014

Eva Deavila
1219 Fremont Street
Des Moines, IA 50316

Dear Child Care Provider,

This letter is in regards to the November 3, 2014 compliance check of your Level A, Registered Child Development Home. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. The following areas were out of compliance at the time of my visit:

☐ 110.5(1) Conditions in the home are safe, sanitary, and free of hazards.

During the spot check several large, glass liquor bottles were observed to be in a location accessible to the children. Provider indicated that these bottles are not typically accessible and were new enough to the home that they had not been put away yet. Provider agreed to move the bottles to a secure location where the children did not have access to ingest the substances or pull the liquor bottles off of the table onto the floor / themselves.

☐ 110.5(1)e All accessible electrical outlets are safely capped.

Safety caps are needed in the kitchen area.

☐ 110.5(1)k Fire and tornado drills are practiced monthly and documentation kept.

Provider knowledge that they do not practiced the drills on a monthly basis. Provider agreed to start doing this and keep proper documentation. Provider was given a form at the time of the spot check to assist in making this process easier.

☐ 110.5(1)n Has a minimum of one single-station, battery-operated, UL-approved smoke detector in each child-occupied room and at the top of every stairway.

Provider agreed to add a smoke detector to the living room or the dining room area.

☐ 110.5(2) A provider file is maintained and contains:

☐ 110.5(2)a A physician's signed statement of health and immunization status on the provider and all members of the household who may be present when children are in the home. Statements must be obtained at the time of initial registration and updated every two years.

Provider reported that she and her household members all need updated physical. Provider was asked to use the new physical forms provided in the packet given at the time of the spot check.

☐ 110.5(2)b During the first year of registration – 12 hours of approved training. At least six hours shall be in a group setting. Two of the twelve hours must be health and safety training. A specific training shall not be used to meet requirements more than one time every five years.

☐ 110.5(2)b During the second year of registration and each succeeding year, twelve hours of approved training. At least six hours shall be in a group setting. If the provider has documentation of completing the ChildNet, PITC, or Beyond Business Basics series, these hours may be used to fulfill two year's training requirements, not including first aid and mandatory reporter training. A specific training shall not be used to meet requirements more than one time every five years.

Provider was not able to show spot check or any verification of classes taken. Provider appears to need 24 hours of classes or training. Provider should call Child Care Resource and Referral(CCR&R) at 1-800-722-7619 for assistance locating classes in trainings.

☐ 110.5(2)c An individual file is maintained for each staff assistant and contains:

provider indicated that her husband at times serves as an assistant/substitute. Provider was not able to show a file for assistant/substitute. But check your was not able to verify if provider did or did not have an approved person as a substitute/assistant. Provider was advised that no person should be responsible for assisting with the care of children without prior approval in the below criteria being met.

☐ 110.5(2)c A completed DHS Criminal History Record Check, form B, 595-1396

☐ 110.5(2)c A completed Request for Child Abuse Information, form 470-0643

☐ 110.5(2)c A physician's signed statement of health and immunization status at the time of employment and at least every two years thereafter.

☐ 110.5(2)c Certification of two hours of approved training relating to identification and reporting of child abuse within 6 months of employment and repeated every 5 years.

☐ 110.5(2)d An individual file is maintained for each substitute and contains:

☐ 110.5(2)d A completed DHS Criminal History Record Check, form B, 595-1396.

☐ 110.5(2)d A completed Request for Child Abuse Information, form 470-0643

☐ 110.5(2)d A physician's signed statement of health of at the time of employment and at least every two years thereafter.

☐ 110.5(2)d Certification of two hours of approved training relating to identification and reporting of child abuse within 6 months of employment and repeated every 5 years.

☐ 110.5(2)d Certification in infant and child first aid that includes mouth-to-mouth resuscitation. If they are unable to locate first aid training that includes mouth-to-mouth resuscitation, they must complete both a first aid course and CPR.

☐ 110.5(8) Children's Files

☐ 110.5(8) An individual file is maintained for each child and updated annually or when there are changes. Each file contains:

☐ 110.5(8)a Identifying information including, at a minimum, the child's name, birth date, parent's name, address, telephone number, special needs of the child and the parent's work address and telephone number.

Provider had the information required on an orange card and agreed to transpose the information into the children's files.

☐ 110.5(8)b Emergency information including where the parent can be reached, the name, street address, city and telephone of the child's regular doctor, and the name number, telephone number, and relationship to the child of another adult available in case of emergency.

☐ 110.5(8)c A signed medical consent from the parent authorizing emergency treatment.

Provider was advised in agreed that she would obtain emergency medical treatment authorization from parents. Provider was given the necessary form.

☐ 110.5(8)f A list signed by the parent which names persons authorized to pick up the child, their telephone number, and relationship to the child.

Provider agreed to update; four months provided.

☐ 110.5(10) Substitutes

Not out of compliance, provided for providers information only in the event she wants to use and identified assistant/substitute.

☐ 110.5(10)a All standards regarding supervision and care of children apply to substitutes.

☐ 110.5(10)b Except in emergency situations, the provider must inform parents in advance of the planned use of a substitute.

☐ 110.5(10)c The substitute must be 18 years of age or older.

☐ 110.5(10)d Use of a substitute is limited to: No more than 25 hours per month. An additional period of up to two weeks in a 12-month period.

☐ 110.5(10)e The provider maintains a written record of the number of hours substitute care is provided, including the date and the name of the substitute.

☐ 110.8(1) SPECIFIC REQUIREMENTS FOR CHILD DEVELOPMENT HOME CATEGORY "A"

☐ 110.8(2) Has three written references which attest to character and ability to provide child care.

Provider reported sending these documents into registration and agreed to obtain copies for her file.

Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Development Home Registration. **Please take whatever steps are necessary to completely address each of the violations noted above. It is essential you correct all above-mentioned violations within the next 45 days.**

☐ Based on the items out of compliance listed above, you will be required to have a recheck or follow up visit to your home. This visit will occur after the 45 day time period has elapsed.

x ☐ Based on the items out of compliance listed above, a recheck or follow up visit to your home is not necessary. However, it is essential you provide documentation to the Department that certifies you have corrected each of the identified regulatory violations and are now in complete compliance with all Departmental regulatory mandates. **Please check mark each of the boxes listed above when the necessary corrections have been completed. By doing so, you certify that you have completed all of the mandated regulatory requirements contained within each identified section.**

I certify that I have taken all of the steps necessary to correct each of the identified violations noted above and am now in complete compliance with all of the Departmental mandated regulatory rules.

Please sign and date below, and return this form in the provided envelope by: January 2, 2015.

X _____
Signature Date

Please do not hesitate to contact me at DHS at 515-993-1742 or mcrawfo@dhs.state.ia.us if you have any questions regarding this letter.

Sincerely,

Melissa Crawford
Social Worker II

C. Mark Chappelle
Social Work Supervisor

Always Remember:

Child Care Resource and Referral is an excellent resource for providers to access training options and support in your area. You can reach Child Care Resource and Referral at 1-800-722-7619.

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you need to use only DHS approved training and only 12 hours can be by self-study. You can access the approved training by going to http://www.dhs.state.ia.us/Consumers/Child_Care/Professional_Development.html and you can sign up for training at <https://ccmis.dhs.state.ia.us/trainingregistry/>

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).